



U.S. Department of Veterans Affairs

Veterans Health Administration
VA North Texas Health Care System

Postdoctoral Residency in Clinical Neuropsychology

Dallas VA Medical Center

Mental Health (116A)
4500 S. Lancaster Road
Dallas, Texas 75216
(214)857-0534
<http://www.northtexas.va.gov/Psychology>

Applications due: **January 1, 2020**

Positions offered: 1

Total Residents: 2

Aim of Program

The aim of the VANTHCS Postdoctoral Residency in Clinical Neuropsychology is to provide training which prepares one for employment as a neuropsychologist in a VA or academic medical setting in addition to being eligible for board certification in Neuropsychology through the American Board of Professional Psychology.

Upon completion of this program, residents should be prepared and eligible to meet licensure requirements for the state of Texas. Those seeking licensure in a different state will need to independently ensure this program meets requirements for licensure in that state.

Application and Selection Procedures

ELIGIBILITY REQUIREMENTS:

- Applicants must be U.S. citizens.
- A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
- Applicants are in (or have completed) an APA-accredited doctoral program in clinical or counseling psychology.
- Applicants must have completed an APA-accredited internship program and earned their Ph.D. or Psy.D. (defended their dissertation) prior to the start of the residency.
- Applicants must have significant prior experiences related to clinical neuropsychology as evidenced through coursework/practicums and show a strong interest to practice clinical neuropsychology as a profession.

APPLICATION REQUIREMENTS:

- Cover letter outlining career goals and goodness of fit. As an attachment to this letter, please state the number of reports written (graduate school and internship) and list the neuropsychological tests that you have administered and scored.
- A current curriculum vitae
- Official graduate transcripts
- Three letters of recommendation, one of which must be from an internship supervisor
- Two de-identified neuropsychological assessments (reports only)
- Verification of Completion of Doctorate (to be completed by Dissertation Chair or Director of Clinical Training). The form may be downloaded from:
http://www.appcn.org/assets/1748/doctorate_verification_form.pdf

APPLICATION SUBMISSION PROCEDURE:

This site is participating in the APPA CAS (APPIC Psychology Postdoctoral Application) process. All application materials are to be submitted by this process through the website: www.appic.org.

RECRUITMENT/SELECTION PROCEDURES:

As an APPCN-member program, the two-year clinical neuropsychology program participates in the matching program for clinical neuropsychology postdoctoral residencies, administered by National Matching Services (NMS). (www.natmatch.com). We adhere to all policies regarding the matching program. Applicants are encouraged to attend the annual North America Meeting of the International Neuropsychology Society (INS) in February where many applicants are interviewed after initial review of their application materials. For more information about this meeting, including locations and specific dates see the INS website (www.the-INS.org). Applicants unable to attend the INS meeting can arrange for an on-site interview, phone interview or teleconferencing interview prior to the deadline for submission of the rank order lists for this program.

Prior to beginning the fellowship year, it will be necessary for applicants selected for the fellowship program to complete paperwork (e.g., Declaration for Federal Employment and Application for Health Professions Trainees) and training modules as directed. During the training program, fellows are responsible for adhering to the policies and procedures of the Psychology Training Program and the Psychology Section. Also, many of the laws, rules, and guidelines that apply to federal employees are also applicable to trainees in federal training positions. For example, fellows may be subject to random drug screening. A copy of the policies and procedures of this training program will be made available to fellowship applicants and is provided to each fellow during orientation at the beginning of the training year.

The North Texas VA Healthcare System is committed to upholding an inclusive environment so that the associated stakeholders, (Veterans, supervised trainees, staff psychologists, technical and clerical staff) feel encouraged and supported to incorporate all aspects of themselves into their experience at our facility. We believe that the honoring of the unique aspects of each individual is compulsory for the optimal development of highly qualified, effective and satisfied professionals, and ultimately, improves

the quality of the services that we provide to our Veterans. As a result, we especially encourage applicants with knowledge and experience with cultural and ethnic diversity issues to apply.

NON-DISCRIMINATION POLICY

VA is committed to ensuring Equal Employment Opportunity (EEO), promoting workforce diversity, workplace inclusion, and constructively resolving conflict to sustain a high-performing organization in service to our Nation's Veterans. VA will vigorously enforce all applicable Federal EEO laws, executive orders, and management directives in order to ensure equal opportunity in the workplace for all VA employees. This document summarizes VA's EEO, Diversity and Inclusion, Notification and Federal Employee Antidiscrimination and Retaliation Act (No FEAR), and Whistleblower Rights and Protection policies.

VA does not tolerate unlawful discrimination, including workplace harassment, based on race, color, religion, national origin, sex (including gender identity, transgender status, sexual orientation, and pregnancy), age (40 or older), disability, genetic information, marital status, parental status, political affiliation, or retaliation for opposing discriminatory practices or participating in the discrimination-complaint process. This applies to all terms and conditions of employment, including recruitment, hiring, promotions, transfers, reassignments, training, career development, benefits, and separation.

Residency Setting

The Dallas-Fort Worth Metroplex is a thriving metropolitan area of 5 million people, including over 40% who consider themselves ethnic minorities. There is a dynamic and growing arts community including both professional and community theater groups, the Dallas Symphony, Dallas Civic Opera, The Fort Worth Ballet, the Dallas Museum of Art, the Kimbell Art Museum, and the Amon Carter Museum of Western Art. There are also hundreds of shops, galleries, and restaurants throughout the city. Outdoor recreation is abundant with many areas available for camping and mountain biking (www.DORBA.org) and with several area lakes suitable for fishing, water skiing, and other water sports. Major league professional athletics include football (the Dallas Cowboys), baseball (the Texas Rangers and three minor league teams), basketball (the Dallas Mavericks), hockey (the Dallas Stars), and soccer (the FC Dallas).

Housing is readily available throughout the city within easy commuting distance from the medical center, which is located 10 miles south of downtown Dallas and is served by several traffic arteries. Information concerning housing, transportation, and employment opportunities may be obtained from the Dallas Chamber of Commerce, 1597 Pacific, Dallas, Texas 75201.

The Dallas area is a major educational center in the Southwest. The area fosters training in academics and science in addition to the arts and humanities. Area universities include the University of Texas Southwestern Medical Center, the University of Texas at Dallas, the University of Texas at Arlington, Texas Woman's University in Denton, University of North Texas in Denton, Southern Methodist University in Dallas, Dallas Baptist University, and the University of Dallas. Dallas is also the site for many professional workshops, seminars, and conventions. There is a state professional organization, the Texas Psychological Association, and local professional organizations, the Dallas Psychological Association and the Tarrant County Psychological Association, that fellows may join as student members. The state organization frequently holds its annual convention in Dallas, and students are encouraged to submit their research for presentation at this convention. The local organizations hold monthly meetings that

address a variety of issues of concerns to psychologists in the area. A number of specialized professional and student organizations are active in the area.

The VA North Texas Health Care System (VANTHCS) has the largest Mental Health Service in the country, with over 500 staff who served over 30,000 unique veterans in 2012. The Dallas VA is the second largest VA in the country with multiple specialized programs. There is an APA-approved pre-doctoral Clinical Psychology Internship program that currently includes eight interns, including two neuropsychology interns. Additionally, there is an APA-approved (re-accredited until 2019) postdoctoral program in Clinical Psychology including seven residents in emphasis areas of Substance Abuse, Trauma, Geropsychology, Rehabilitation/Medical Psychology, Patient Aligned Care Teams (PACT), and Family/Couples Therapy. There are 80+ psychologists on staff (10 which are ABPP in various areas, 3 ABPP in Neuropsychology). Dallas has formally trained psychology trainees since the early 1980's and postdocs of different specialties since 1992. The Neuropsychology fellowship has been established since 2014. We also have a strong relationship with the University of Texas Southwestern Medical School.

PROGRAM ADMINISTRATION:

The Clinical Neuropsychology Residency program is housed within the Psychology section of the Mental Health Department of VANTHCS. This is a separate program from the Clinical Psychology Residency program. It is coordinated, organized and directed by the Co-Training Directors (Barry Ardolf, Psy.D., ABPP & Andrea Zartman, Ph.D., ABPP) who are board certified neuropsychologists. The Co-Training Directors are supported through collaboration by the VANTHCS Clinical Psychology Training Director (Jamyah Jackson, Ph.D., ABPP) and Chief of Psychology (Colleen Richardson, Psy.D.) concerning training program issues. The Co-Training Directors are each granted 0.25 release time for training responsibilities for the postdoctoral fellowship in neuropsychology. The Co-Training Directors meet weekly to discuss the management of the program and trainees' progress.

A Postdoctoral Training Committee (PTC) is established under the direction of the VANTHCS Clinical Psychology Training Director which is comprised of representatives of all major segments of Psychology Service, with particular emphasis on the most active training opportunities. Each emphasis area is represented in the monthly Postdoctoral Training Committee meeting to discuss training issues and review progress of trainees. Resident representatives are part of that committee and are included in all matters other than discussion of trainee evaluations which occurs at the end of the meeting. The Co-Training Directors meet with adjunctive supervisors as needed. Staff supervisors are aware that the Neuropsychology Co-Training Directors, Clinical Psychology Training Director and Chief of Psychology have an open-door policy with regard to issues or concerns regarding training.

The VANTHCS Residency in Clinical Neuropsychology is a highly valued training program at our medical center and exists with other disciplines in various areas of medical training. These other allied health disciplines include Social Work, Physical and Occupational Therapy, Speech Pathology, and others. Education and training is one of the four missions of the Veterans Health Administration, the other three being Clinical Services, Research, and as back-up for the Department of Defense. The Neuropsychology training program is closely aligned with the Education Service at VANTHCS and has benefited from this close association.

DIVERSITY MISSION STATEMENT:

This residency is deeply committed to fostering multicultural competence and diversity awareness. The overall goal of our training activities is to produce neuropsychologists that are sensitive to individual differences and demonstrate the ability to apply diversity-based models in clinical settings. To this point, the Psychology Diversity Committee is comprised of VANTHCS psychologists who are committed to helping trainees, psychologists and other stakeholders develop increased awareness, knowledge, and skills necessary for working with highly diverse patient populations. It aims to explore how, as mental health professionals our biases, power, privilege, assumptions, and life experiences affect our clinical work. This committee conducts a series of monthly diversity journal clubs in which reflective discussions foster professional development (see didactics for details). This committee also holds a yearly half-day conference regarding various topics. Finally, they host a regularly scheduled luncheon celebrating different cultures. Interested residents can participate in the Diversity Committee and are encouraged to aid with activity planning as well as serve as a liaison with their cohort.

The Dallas VA serves Veterans from a highly diverse area, encompassing urban and suburban communities around the North Texas area. Our heterogeneous setting gives residents the opportunity to provide services to Veterans from a variety of backgrounds. Veterans in this area are ethnically diverse, providing trainees with the opportunity to develop competencies in working with patients from many different cultural backgrounds. Residents have the opportunity to provide services to a variety of minority and underserved populations, which is vital to the training of well-rounded psychologists. The Dallas VA has an active homeless program, which coordinates health care, services, and advocacy for homeless Veterans. Lesbian, Gay, Bi-sexual, and Transgendered (LGBT) Veterans are increasingly seeking services at Dallas VA and the broader Dallas metropolitan area features a large and active LGBT community. Increasingly, the veteran population includes greater numbers of women, which presents opportunity for residents to develop skills for competently addressing sex and gender issues in their training. Finally, the Dallas VA provides services tailored to address the needs of Veterans across their lifespan and residents are offered opportunities to work in settings where age related issues are relevant (e.g. younger Vets setting education goals and re-integrating into families/community after deployment, middle-aged Vets adjusting to retirement and medical problems, elders facing end-of-life issues). As such, residents will be immersed in dimensions of diversity including but not limited to national origin, immigration status, language differences, religious/spiritual beliefs, and physical ability.

FUNDING/SALARY:

Funding for the postdoctoral residency is annually renewed through dedicated funds from VA Central Office's OAA. The expected stipend for our residents is \$49,311 in the first year and \$51,976 during the second. Please note there is no state income tax in Texas. Benefits include the opportunity for group health insurance, vision and dental insurance as well as 10 paid federal holidays a year and up to 13 paid vacation and sick days as well.

FACILITY AND TRAINING RESOURCES:

Residents use a private staff office for conducting evaluations and share an office space for completing other assigned duties in the same hallway the staff neuropsychologists. A networked PC with a full range of software is provided. Psychological and neuropsychological assessment tools are readily available. The medical library is state of the art and their staff prides themselves in finding accurate information and completing searches in an expeditious fashion. Residents are provided additional

resource materials such as essential journal reading, test instructions manual, and handbook upon entry to the program. Administrative support is provided by the Psychology Section of the Mental Health Service and neuropsychology technicians.

Training Model and Program Philosophy

CLINICAL TRAINING:

The VANTHCS Residency in Clinical Neuropsychology fosters the trainees' clinical skills in the focused training area of neuropsychology through the continued clinical experiences that build upon their previous training in practicum and internship. Training is further developed through focused didactic activities of case conceptualization, neuropsychology focused journal club, neurology experiences, group supervision, individual supervision, neurology grand rounds and brain cutting. These specialized and focused activities form a program beyond apprenticeships or "on-the-job training."

At the beginning of their training the residents complete a pre-test "fact finding" to identify areas of growth as well as completing another fact finding at the end of their training to compare to their initial assessment. Residents define goals and interests with their supervisor, which in turn directs their individualized focused training experiences to foster further growth in defined areas of weakness. The resident's progress is also assessed at the middle and end of each primary supervisor's rotation (every 4 months) for a total of six evaluations of their core competencies during the training. Residents will also be assigned a mentor who has no supervisory role and serves to help the resident further develop their professional identity. The combination of focused neuropsychological training in the Neuropsychology Consult Team along with additional training experiences on minor rotations allows them exposure to varied patient populations and treatment settings while still maintaining the focus on clinical neuropsychology. While a high standard of patient care is expected, the workload distribution emphasizes training and includes 60% clinical time, 20% didactics, 10% tiered supervision and 10% research with emphasis on providing empirically based assessments and interventions. There are no work-load targets, although it is hoped that as residents progress through the program, they become more efficient in service delivery.

RESEARCH:

Each resident will be required to complete an individual research project during their two-year training. Research projects are largely completed through the collaborative relationship with our sister academic medical center, the University of Texas Southwestern Medical Center. Residents participate in research meetings and assigned primary research mentors through UTSW. Residents attend research meetings every other Friday at UTSW. Year one goals will focus on identification of the research topic, the initial literature review, outlining proposed methods and finally providing a description of the proposed analyses. Once these tasks are accomplished and the product is approved by the Co-Directors of the program, the resident will apply for IRB approval, if necessary. Year two's goals include data collection, analyses, and interpretation. The completed project will be presented to the VANTHCS Mental Health Grand Rounds at the end of their second year. The final expectation regarding resident research is the submission of the project to a journal for publication by the end of the second year and/or presentation at a national conference.

SUPERVISION AND DIDACTICS:

Each resident will be provided with a minimum of 2 hours of face-to-face individual supervision on a weekly basis with his or her assigned neuropsychology supervisor. This program follows a developmental type of supervision. While initially supervision will be more hands on, once the resident progresses through the program and especially in their second year of training, supervision will evolve from less hands on to more of a junior colleague. Additionally, the level of supervision will likely fluctuate given the complexity of the cases you and your supervisor see. Each supervisor has a different supervision style within this general framework. We generally expect residents to have the chart reviewed with the intent to present the findings to the neuropsychologist prior to seeing the patient. Following testing, we expect all of the tests scored and the summary sheet completed prior to supervision and to present the relevant information in a sequential fashion that generally follows the initial sections of the report. Emphasis is placed on providing a concise, structured review of history and test results, followed by a more exploratory, interactive discussion regarding the possible diagnostic impressions, implications, and subsequent recommendations. There will also be a minimum of 2 hours of group supervision a week, one of which also includes psychology interns and practicum students.

There are several didactics opportunities that serve to further enhance the residents neuropsychological training.

REQUIRED DIDACTICS:

Neuropsychology Group Supervision: (Monday 2:30-3:30pm) Residents meet with neuropsychology staff, psychology interns, practicum students and other residents interested in neuropsychology. Once a month the group supervision will be a fact-finding exercise; other times various topics pertaining to neuropsychology and the development of a neuropsychologist will be presented/discussed. Residents are provided a proposed schedule of the topics to be covered each week.

Psychology Group Supervision: (Every other Monday 3:30 – 4:30pm) Neuropsychology Residents meet with the Clinical Psychology Director of Training, Jamylah Jackson, Ph.D., ABPP and other psychology postdoctoral fellows at Dallas VA to discuss professional development and professional issues pertaining to the broad field of Psychology.

Quality Practice Review: (First Wednesday 8:00-9:00am) Residents join Neuropsychology Staff for peer review as required by the hospital credentialing board. Residents are expected to present one case per year. While residents are involved in discussion of the case, they are asked to leave the room when staff members rate the presentation for quality control and do not have voting privileges.

Monthly Brain Cuttings and Neurology Grand Rounds at UTSW: (First Wednesday 11:00am – 3:00pm) On the first Wednesday of the month, residents travel with a neuropsychology staff member to the University of Texas Southwestern Medical Center to participate in Neurology Grand Rounds and Brain Cuttings. However, this is at the discretion of whether or not brains are available.

Neuropsychology Journal Club: (Second, Third and Fourth Wednesday 1:00pm-2:00pm) Each session, 1-2 journal articles are covered on a wide range of subjects pertinent to the field of Neuropsychology in preparation for board certification. Residents are expected to present on at least two different journal topics per year. On days they are not presenting, they are expected to bring in at least 2 questions/opinions per article to discuss with the group. Residents are expected to assist the interns in

selecting and preparing for their presentation. There is a joint session with San Antonio VA, four times a year discussing various professional issues.

Case Conceptualization: (Second & Fourth Thursday 1:00-2:00pm) Residents are expected to bring recent, not yet supervised cases to case conference for discussion in front of other neuropsychology trainees (interns & practicum students) and staff. One trainee provides a brief presentation of the case while another trainee(s) interpret the data and provide provisional diagnostic impressions and recommendations.

Research Meeting: (Third Thursday 1:00-2:00pm). All of the current neuropsychology trainees get together to talk about their ongoing research projects and status of each project. There is discussion of next steps and an opportunity to get feedback from others about their own research project.

Cultural Diversity Journal Club: (Third Friday of each month 8:00-9:00am) Discuss articles related to a variety of topics relevant to specific patient populations and promotion of multicultural competence (e.g. spirituality, SES, disability, LGBTQ, immigration/acclimation, aging, women's issues, etc). Reflective discussions bring trainees and staff together to provide in-depth conversation on how to improve diversity in care. Residents are expected to present once each year of their training.

UTSW Neuroanatomy Course: (Fall semester, 2nd year) Residents travel to UTSW to participate in medical school course focused on functional neuroanatomy. Residents are not expected to pay for this course and instead are enrolled through an "audit" status.

OPTIONAL DIDACTICS:

VA Mental Health Grand Rounds: (Third Thursday 12:00 - 1:00pm, Bldg 43, Room 108, pizza provided) Residents have the opportunity to attend this grand round session in which VA Mental Health staff present on various programs/treatments and research going on at VA.

UTSW Psychiatry Grand Rounds: (Wednesdays 12:00 - 1:00pm, Bldg 1, Rm 571, Sept-May) Residents have the opportunity to attend the general grand rounds with all Mental Health staff from both VA and UTSW. Lectures are through V-tel from UTSW and often feature speakers from throughout the country on a variety of topics related to mental health.

PROVIDING SUPERVISION AND TEACHING:

Throughout both years of training, residents are expected to teach various segments of the Assessment Seminar to the psychology internship class. Throughout both years, residents attend a specific lecture series on supervision. During their second year of training, residents provide layered supervision of a practicum student and are involved in all aspects of this duty.

Program Goals, Objectives and Competencies:

The educational goals for this training program include:

Professionalism

The trainee will develop a greater understanding regarding various professional and ethical issues faced in the field of Neuropsychology and learn how to become involved at a national level in the field through professional organizations.

Individual and Cultural Diversity

The trainee will develop a greater appreciation of themselves from a cultural standpoint, how others are shaped by diversity, and the impact of this on the neuropsychological evaluation from both an administration and interpretation standpoint.

Self-Assessment / Self-Care

The trainee will gain a focused appreciation of their current strengths and weaknesses as well as develop a plan to foster weaknesses into strengths. They will also gain knowledge about the importance of self-care.

Ethical Standards

The trainee will develop a deeper appreciation for the common ethical situations that can occur in neuropsychology as well as how to handle these types of situations appropriately.

Research

The trainee will become a more refined consumer of research to inform assessment/treatment recommendations. They will also gain greater confidence and knowledge in producing original research themselves with support of research mentors to assist them through the process of developing an idea, collecting data to eventual publication.

Neuropsychological Assessment

The trainee will gain advanced skill in conducting a neuropsychological evaluation that answers the referring provider's request and takes into account relevant multicultural and psychosocial issues. They will also develop extensive knowledge of brain-behavior relationships in regards to a variety of neurological, medical and psychiatric conditions that can cause cognitive impairments and possess advanced knowledge of neuroanatomy and functions related to structures therein.

Neuropsychological Intervention

The trainee will learn to develop appropriate recommendations to providers and patients based on clinical findings as well as provide feedback to patients and family members.

Neuropsychological Consultation

The trainee will learn how to develop working relationships with various medical providers/referral sources as well as how to effectively communicate test results into clinically meaningful solutions.

Interdisciplinary Systems

The trainee will increase their knowledge of other professions within a healthcare setting that can contribute to the overall health of an individual. During their minor rotations, they will be functioning in a multidisciplinary context and gain valuable experience working closely with other professionals.

Supervision / Teaching

The trainee will have opportunity to learn effective supervision methodologies as well as teach practicum students/psychology interns and serve as a supervisor for a practicum student during the second year of training.

Program Structure and Requirements for Completion:

GENERAL REQUIREMENTS:

- The Neuropsychology Postdoctoral Residency program is a 2-year full-time program. Residents are expected to work a minimum of 40 hours a week. Realistically, most residents work 40-50 hours per week based on their efficiency and time management skills. The residents are required to complete a minimum of 4160 (2,080 hours per year) hours over the course of the 2-year program.
- Successful completion of 1-3 minor rotations that serve to further enhance the residents training and career goals.
- Successful completion of all rotation and seminar requirements, including necessary presentations.

MINIMUM LEVELS OF ACHIEVEMENT:

- At the time of the initial core competency rating (4 months), residents will have a majority of their ratings (greater than 50%) at a 4 or above
- At 8 months, resident's ratings will be at a 4 or above and any rating less than a 4 will result in the development of a remediation plan
- At 12 months, the majority of the resident's ratings (greater than 50%) will be at a 5 or above
- At 16 months, the residents ratings will be at a 5 or above and any rating less than 5 will result in the development of a remediation plan
- At 20 months, the majority of the resident's ratings (greater than 50%) will be at a 6 or above
- At the end of their residency, all of the resident's ratings will be at a 6 or above, indicating the resident is prepared to begin independent practice

ROTATION REQUIREMENTS:

- First year:
 - First 6 months: Neuropsychology Consult Team with 2-3 reports per week, didactics, research.
 - Second 6 months: Neuropsychology Consult Team 2 days, Neurology inpatient rounds 1-2x/week, didactics, research.
- Second year:
 - Neuropsychology Consult Team 2 days, Neurology 1 day, minor rotation 1-2 days, Didactics, research, supervision. 1-3 different minor rotations can be selected depending on interest, areas of growth and goals of resident.

EXIT CRITERIA:

- Minimal graduation requirement: At the end of their residency, all of the resident's ratings will be at a 6 or above, indicating the resident is prepared to be begin independent practice.

Consistent with the Houston Conference Guidelines on specialty training in Neuropsychology, the exit criteria include the following:

- Advanced skill in the neuropsychological evaluation, treatment and consultation to patients and professionals sufficient to practice on an independent basis.
- Advanced understanding of brain and behavior relationships
- Scholarly activity (e.g., publication, presentation, etc.)

Training Experiences:

MAJOR ROTATION:

Neuropsychology Consult Clinic:

Residents are primarily housed in the Neuropsychology Consult Team. This team primarily conducts both outpatient and inpatient neuropsychological evaluations requested from a wide variety of referral sources including Neurology, Mental Health and Primary Care. The cases seen on this team are typically complex in nature with contributing medical, psychological and neurological etiologies to consider and range in age from 19-99 years old. Residents are responsible for seeing 3 outpatients in this clinic per week for the first six months and then 2 outpatients a week during their second six months when on Neurology inpatient rounds. Residents will see two outpatients a week during their second year when they also have their minor rotations. Residents are expected to complete their own testing during their first year of training but are able to use a technician during their second year of training.

MINOR ROTATIONS:

Mental Health Silver Team:

Patients age 70 and older are assigned to this team for their care regardless of their psychiatric diagnosis. In this manner, the Silver Team is very much a general practice team with specialization in terms of the age cohort which it treats. Residents work within the context of an interdisciplinary team at all stages of patient evaluation and treatment. They acquire knowledge of and skills in neuropsychological assessment and common mental health problems associated with aging. The vast majority of work will be with outpatients conducting comprehensive assessment, determination of capacity, and if desired, individual and/or group psychotherapy. However, the resident may be called upon periodically to see inpatients. Residents are actively engaged in all aspects of evaluations from test-selection to feedback and there is the possibility of layered supervision with interns or practicum students.

Spinal Cord Injury Unit:

The Spinal Cord Injury Center (SCIC) is an 11-million dollar addition to the Dallas VA that opened in 1996. The center includes a 30-bed inpatient unit to care for the medical and rehabilitation needs of

persons with spinal cord injuries or other neurological dysfunctions (e.g., Multiple Sclerosis, Guillain-Barre Syndrome, and Cervical Stenosis) as well as an outpatient clinic for comprehensive care throughout the lifespan. The SCIC operates a CARF accredited rehabilitation program for spinal cord injury. The clinical mission of the Spinal Cord Injury Center is to enhance the health, functional abilities and quality of life for persons with spinal cord injury or disease. Psychology is an integral part of the interdisciplinary team that works together toward this stated goal. Other members of the team include: physicians, physician assistants, nurses, social workers, occupational therapists, physical therapists, recreational therapists, psychology technician, chaplains, and dietitians. Patients served at the SCI Center comprise a diverse population in terms of ages (19-89), disabilities, medical conditions, education (4th grade through Ph.D. level), occupations, family support, and psychiatric diagnosis. Services provided as part of an SCI rotation include: neuropsychological assessment, behavioral modification, marital and/or family therapy, group therapy (e.g. Caregiver Psycho-educational Groups, Peer Mentoring Program), sexuality counseling, smoking cessation services, pain management, substance abuse screening, and consult liaison services for the SCI Outpatient clinic. Another important role for psychology is providing staff consultation and education.

Community Living Center (CLC: Rehabilitation/Extended care):

The CLC is a 120-bed extended care facility which provides rehabilitation in an interdisciplinary setting for veterans who are recovering from stroke, those who need long-term care due to chronic illness (e.g., cardiac disease, diabetes, chronic obstructive pulmonary disease), those who need respite care due to loss of caretaker, those who need hospice care due to terminal illness (e.g., cancer, AIDS), those who suffer from various kinds of dementia, and those who have experienced traumatic brain injury. Residents participate in all the activities of the interdisciplinary treatment team and function with responsibility for the assessment, diagnosis, and treatment of veterans. Residents will have the opportunity to participate in the STAR-VA program, a behaviorally based program to address difficult behaviors in dementia in order to reduce reliance on psychotropic intervention. Other opportunities include participation in support groups for caregivers and involvement in the AEGIS volunteer peer counseling program at the Community Living Center. Approximately 60% of a resident's time will be spent in assessment-oriented activities and 40% in treatment activities during this rotation.

EXPERIENCE ROTATIONS:

Neurology

Starting in the 7th month of training, experience residents participate in inpatient Neurology rounds twice a week for 6 months. This allows for experience with acute stroke and other inpatient aspects of a neurological practice not typically seen in the outpatient Neuropsychology clinic. Following this, residents spend a minimum of one day a week embedded within a variety of outpatient neurology clinics with the assigned Neurologist including General Neurology Clinic, MS Clinic, Movement Disorders Clinic, and Neuroradiology. Residents will spend approximately one month in each clinic.

Sleep Clinic

In the Sleep Clinic, residents have the opportunity to observe and conduct sleep questionnaire interviews within the sleep clinic to develop a better understanding of the various sleep disorders and their treatment. Residents also attend a weekly sleep disorders focused journal club facilitated by the physicians in the Sleep Clinic.

Training Staff

Barry R. Ardolf, Psy.D., ABPP-CN (BarryR.Ardolf@va.gov)

Graduate Program: Forest Institute of Professional Psychology
Internship Program: VA North Texas Health Care System, Neuropsychology Track
Neuropsychology Fellowship: Henry Ford Hospital, Detroit, MI.
Diplomate in Clinical Neuropsychology, American Board of Professional Psychology (ABPP)
Primary Job Assignment: Neuropsychology Consult Team
Interests: Neuropsychological Assessment, Dementia, Geropsychology
University Affiliation: Assistant Professor, University of Texas Southwestern Medical School

Helen Chung, Ph.D. (Helen.Chung1@va.gov)

Graduate Program: Oklahoma State University, Counseling Psychology
Internship Program: VA North Texas Health Care System, Medical Psychology Track
Geropsychology Fellowship: VA North Texas Health Care System, Dallas, TX.
Diplomate: None
Primary Job Assignment: Community Living Center (CLC) Geriatric Extended Care
Primary Interest/Expertise: Rehabilitation psychology and dementia
University Affiliation: None

Heejin Kim, Psy.D., ABPP-CN (Heejin.Kim@va.gov)

Graduate Program: Pepperdine University, Clinical Psychology
Internship Program: NYU Rusk Institute of Rehabilitation
Neuropsychology Fellowship: San Antonio Military Medical Center, San Antonio, TX.
Diplomate in Clinical Neuropsychology, American Board of Professional Psychology (ABPP)
Primary Job Assignment: Mental Health Silver Team (geriatrics/dementia team)
Primary Interest/Expertise: dementia, stroke, TBI
University Affiliation: None

Emma Shapiro, Ph.D. (Emma.Shapiro@va.gov)

Graduate Program: Palo Alto University, Clinical Psychology
Internship Program: Battle Creek VA
Neuropsychology Fellowship: VA North Texas Health Care System, Dallas, TX
Diplomate: None
Primary Job Assignment: Spinal Cord Injury Unit
Primary Interest/Expertise: Neuropsychology (general), PTSD, dementia, MS
University Affiliation: None

J. Gregory Westhafer, Ph.D. (John.Westhafer@va.gov)

Graduate Program: University of Texas at Austin, Clinical Psychology
Internship Program: UAB-BVAMC Consortium
Neuropsychology Fellowship: West Virginia University, Morgantown, WV
Diplomate: None
Primary Job Assignment: Neuropsychology Consult Team
Primary Interest/Expertise: Neuropsychology (General), Movement Disorders, Dementia, TBI, Stroke
University Affiliation: Assistant Professor, University of Texas Southwestern Medical School

Andrea Zartman, Ph.D., ABPP-CN (Andrea.Zartman@va.gov)

Graduate Program: University of North Texas, Clinical Health Psychology and Behavioral Medicine

Internship Program: VA North Texas Health Care System, Neuropsychology Track

Neuropsychology Fellowship: VA South Texas Health Care System, San Antonio, TX

Diplomate in Clinical Neuropsychology, American Board of Professional Psychology (ABPP)

Primary Job Assignment: Neuropsychology Consult Team & Team Leader, Behavioral Health Team

Interest/Expertise: TBI vs PTSD, dementia, ecological validity of executive functioning

University Affiliation: Associate Professor, University of Texas Southwestern Medical School

Postdoctoral Residency Admissions, Support, and Initial Placement Data

Program Tables Updated: 1/15/19

Postdoctoral Program Admissions

Important information:
The aim of the VANTHCS Postdoctoral Residency in Clinical Neuropsychology is to provide training which prepares one for employment as a neuropsychologist in a VA or academic medical setting in addition to being eligible for board certification in Neuropsychology through the American Board of Professional Psychology. Application materials include: Cover letter outlining career goals and goodness of fit. As an attachment to this letter, please state the number of reports written (graduate school and internship) and list the neuropsychological tests that you have administered and scored, a current curriculum vitae, official graduate transcripts, three letters of recommendation, one of which must be from an internship supervisor, two de-identified neuropsychological assessments (reports only), letter from dissertation chair regarding dissertation status and anticipated completion date, if doctoral degree has not been completed at the time of this application.
Minimum criteria:
<ul style="list-style-type: none"> • Applicants must be U.S. citizens. • Applicants are in (or have completed) an APA-accredited doctoral program in clinical or counseling psychology. • Applicants must have completed an APA-accredited internship program and earned their Ph.D. or Psy.D. (defended their dissertation) prior to the start of the residency • Applicants must have significant prior experiences related to clinical neuropsychology as evidenced through coursework/practicums and show a strong interest to practice clinical neuropsychology as a profession

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Residents	\$49,311 1 st year \$51,976 2 nd year
Annual Stipend/Salary for Half-time Residents	N/A
Program provides access to medical insurance for resident?	Yes
If access to medical insurance is provided Trainee contribution to cost required?	Yes
Coverage of family member(s) available?	Yes
Coverage of legally married partner available?	Yes
Coverage of domestic partner available?	Yes
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	13 days
Hours of Annual Paid Sick Leave	13 days
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes
Other Benefits (please describe)	10 Federal Holidays

Initial Post-Residency Positions

	2014-18	
Total # of residents who were in the 3 cohorts	3	
Total # of residents who remain in training in the residency program	2	
	PD	EP
Community mental health center		
Federally qualified health center		
Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center		2
Military health center		
Academic health center		
Other medical center or hospital		
Psychiatric hospital		
Academic university/department		
Community college or other teaching setting		
Independent research institution		
Correctional facility		
School district/system		
Independent practice setting		
Not currently employed		
Changed to another field		
Other		
Unknown		

Note. "PD" = Post-doctoral residency position; "EP" = Employed Position.